DOCUMENT RESUME

ED 334 779 EC 300 525

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TITLE The Prereferral Process: A Positive Intervention.
PUB DATE 89
NOTE 14p.
PUB TYPE Viewpoints (Opinion/Position Papers, Essays, etc.) (120) -- Information Analyses (070)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS At Risk Persons; *Behavior Problems; Cooperation; Elementary Secondary Education; Interdisciplinary Approach; *Intervention; *Learning Problems; Parent Role; Prevention; Referral; Special Education; Student Evaluation; Student Role; Teacher Role
IDENTIFIERS *Prereferral Intervention

ABSTRACT

The prereferral process for intervention with students who might be candidates for special education can provide indirect services outside of the special education system and has benefits for teachers, parents, and students. During the prereferral process the classroom teacher remains the pivotal professional. Teachers observe the student's problems and coordinate with each other in developing identification standards and a non-threatening trial intervention. The prereferral process also stresses parental involvement at an early stage of intervention and predisposes the parent to a cooperative position. Students are benefitted by consistency of behavioral and academic expectations, inclusion in the intervention and evaluation process, and early identification of problems putting them at risk. Provision of a formal intervening step through the prereferral process allows earlier identification of problems, encourages a school climate of collegiality, and fosters parental and student involvement. Includes 7 references. (DB)

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THE PREREFFERAL PROCESS:

A POSITIVE INTERVENTION

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THE PREREFERRAL PROCESS: A POSITIVE INTERVENTION

The prereferral process is often viewed as a means to reduce inappropriate referrals for formal testing and to assist students to remain in the least restrictive environment, the regular classroom (Lloyd, Crowley, Kohler, and Strain, 1988; Graden, Casey, and Christensen, 1985). Prereferral is presented not only as an intervening step between referral and formal testing, but also a means to preclude testing.

The basis for this justification of the prereferral process is the high percentage of referrals which result in formal testing (92%) and the equally high percentage of those students tested who are placed in special education programs (73%) (Algozzine, Christensen, and Ysseldyke, 1982). Cherkes and Ryan (1985) have labelled this predisposition to look for evidence to confirm the hypothesis that students have a special need as the confirmation bias. This bias also incorporates the concept of ignoring counterevidence such as the normal achievement of students. Thus, referral most often results in testing and testing most often results in special education placement.

This high rate of special education placement based upon referral is also based upon the lack of other forms of intervention for students who are not performing appropriately either academically or socially in the regular classroom. Reschley (1988) reports that the

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National Academy of Sciences found that special education was too often seen as the only option for low achieving students. For most schools, the special education screening process is the only means whereby a formal procedure is maintained to scrutinize students who are not performing up to local standards. The only other possible services might be those offered under Chapter I. These mandated federal programs have prescriptive regulations as to eligibility, placement procedures and requirements and the high rates of referral to both services is understandable, if no other options are available.

Are all students who cannot meet the academic or behavioral expectations of the regular classroom handicapped? Should the services available to the handicapped be exclusive to those labelled as handicapped? Are tutoring, remediation and counseling only of benefit to students who have been labelled? The national dropout rate of 25% does not consist of all special education students. Could these at-risk non-handicapped students not benefit from some form of school services? Should regular classroom teachers continue to attempt to work with these at-risk students without benefit of assistance? Is labelling a student as handicapped the only way a student can receive assistance? This exclusivity of special education was also questioned by Graden, Casey and Christensen (1985) when they hypothesized whether special education can and should serve all students affected with learning and behavior problems under the direct services umbrella.

The prereferral process is a procedure whereby students can receive indirect services outside of the special education labelling system. Carter and Sugal (1989) report that twenty-three states require and eleven states recommend the use of the prereferral process. However, this form of intervention remains tied to special education. The term "prereferral" in itself indicates a step in the procedure toward formal testing.

Prereferral would best be viewed as a general screening process which is not directly linked to special education. Special education could be one option which might eventually be considered, but the prereferral element of screening should be a regular education process whereby all students can receive needed assistance. Thus, prereferral would indicate a positive means for schools to help any student who displays problems and not indicate a means for reducing special education placement or formal testing. The benefits of such a positive procedure for students, teachers and parents would include a commitment to the education for all students and not just for those labelled as normal or gifted or handicapped.

BENEFITS TO TEACHERS

When classroom teachers only have the option for direct referral to consideration of special education placement, regular classroom teachers view the ownership of and the solution to student problems as being outside of the regular classroom. Special education then

becomes a true "dumping ground" because it is the only means for deviant students to obtain help. Any deviance from the norm of student academic or social behavior is thought to be dealt with by special education staff.

The continued existence of special education has allowed regular teachers to view their roles as dealing primarily with bright and normal students and only peripherally with problem students. Reschley (1988) found that prereferral is not especially popular within regular education because considerable emphasis is now being placed on the attainment of upgraded academic standards. Maintaining higher academic standards and incorporating methods for problematic students will continue to seem contradictory for teachers unless higher academic standards and education for all students is the underlying school philosophy.

The prereferral process posits ownership of student problems by all the school staff, but the pivotal person in the prereferral process remains the classroom teacher. This teacher is the primary member of the school staff who identifies a student as having a problem. Classroom teachers are the ones who daily note students who perform differently from their peers. Teachers are able to see subleties, patterns and changes in students' behavior because of the intense and continuous observation which occurs in the classroom.

In order to observe deviance as such, teachers must be aware of what deviance is and not base judgments upon personal perceptions. Some teachers are more tolerant; some less. Some teachers see

themselves as therapists; some feel sorry for students and engage in enabling behaviors. It is, therefore, essential that all staff discuss and develop standards for referral. Classroom teachers are the best source for understanding standards and deviance and the consistency in standards for referral will result in more consistency in referrals.

Classroom teachers also need to be aware of what their responsibilities are when student problems occur. Thus, a formal procedure should be developed as to who is responsible for what and under what conditions. Because teaching is an isolated profession, teachers often feel that they are expected to work with all students no matter what behaviors occur and only when behavior becomes intolerable should assistance be sought. For some teachers, referral is a public acknowledgement of personal or professional defeat; for others, it is means of finally being able to give attention to the "real" students. Therefore, a formal procedure and consensual standards for referral will enable the process to become more professional and less personal.

All staff need to discuss possible interventions for students. The school staff who are to assist in helping develop intervention must be viewed as knowledgeable and nonpunitive for teachers to readily seek assistance. A principal in this role might cause teachers to be reluctant to refer because the principal might view student problems as teacher failures. Support staff, such as social workers or diagnosticians, are invaluable assets for interventions,

but a specialist in classroom management and instruction is also necessary. The intervention step of the prereferral process is the most important in that teachers will judge the process by the assistance provided. Lloyd, Crowley, Kohler and Strain (1988) found that teachers were unconvinced that the team explored a sufficient variety of intervention options. Carter and Sugai (1989) found that teachers almost twice as often as other individuals were responsible for designing prereferral interventions. Thus, the intervention team should consist of teachers and other support staff who can brainstorm possible interventions for problem students.

The prereferral process can enable teachers to have assurance that collegial assistance is available. As doctors regularly review patient files with other doctors, so should teachers develop a similar forum. Teachers may be unaware of alternative methods or may be hesitant because other staff may become aware of personal or professional deficiences. Therefore, this forum must be collegial and non-threatening with emphasis upon teacher and student assistance.

BENEFITS FOR PARENTS

The prereferral process allows for collaboration not only among school staff but also between school staff and parents. As Graden, Casey and Christensen (1985) indicate, parents should be notified by the classroom teacher when there is a concern about their child and should be included both for their perspective on the problems and for

intervention planning.

Parental involvement at an early stage of intervention allows parents to view the school as attempting to assist their child within the regular classroom. By the school's willingness to modify instruction, establish behavioral management procedures or provide counseling for their child, parents become aware of the school as trying to help their child and not as immediately seeking to remove their child from the mainstream. Such awareness can dissipate suspicion or hostility and engender parental cooperation.

This is most important especially for parents whose child may eventually be recommended for special education placement. School staff and parents have already been engaged in a process of attempting to define and ameliorate the child's problems. Formal testing is a further step in this process and not the only means of assistance. Parents are then seen as participants who can assist in the process as opposed to outsiders who are being informed by the professionals.

BENEFITS TO STUDENTS

The greatest benefits of the prereferral process are to the students. While inappropriate special education placements will be lessened, students will also not have to be labelled as handicapped to receive needed assistance.

Students will benefit from the consistency of behavioral and academic expectations. School staff will have agreed upon what the

range of normal behavior is and what constitutes deviation from that norm. This consistency will be advantageous to all students because of the clear expectations in all classrooms. Teachers can provide a more immediate and consistent response to even subtle forms of behavior indicative of problems. Thus, students will have less need to escalate their behavior in order to gain required attention.

Students are aware that they are not performing equal to their peers. Therefore, students should be included in the intervention process. By interviewing students, staff can obtain invaluable information on students' perspectives of the causes, circumstances and consequences of the behavior. School staff and parents should not devise interventions to act upon students but should work with students in attempting to ameliorate problems. This is especially important in working with older students because they might be the only ones who are aware of the extent of their problems.

By attempting various forms of intervention and judging the success or failure of each, student problems and interventions become more focused. It is as important to know what doesn't work as it is to know what works. Students can then receive more appropriate services -- whether these services are ultimately provided in the regular or special education classroom.

Prereferral also alerts school staff and parents to potential problems. Students who perform marginally in the classroom but who are not so serious in their behavior as to be referred for formal testing are termed at-risk students. These students need early

identification and interventions, otherwise, they continue to be on the borderline of commitment to education and many eventually drop out. These are the students about whom teachers in hindsight indicate a concern and these are also students which the prereferral process can assist.

SUMMARY

When classroom teachers only have the option for direct referral for consideration of special education placement, teachers can be prone to either defer referral until student behavior escalates to a point whereby the student needs immediate and intense services or to refer the student for minor behavioral problems which could easily be corrected with assistance for the teacher or for the student. However, by the school's providing a formal intervening step through the prereferral process, teachers can seek assistance at an earlier stage of the student's behavior with a clear definition of the reason for the referral. By observing and referring subleties, patterns or changes in student behavior, teachers and other school staff can work together to assist students in changing their behavior and, thereby, possibly precluding the need for special education services.

The prereferral process establishes a school climate of collegiality among school staff. The development of the prereferral form by the staff enables them to define classroom behaviors which are inappropriate or which are indicative of emotional and/or behavioral

problems. Because the student intervention at this stage is primarily in the regular classrooms and by regular classroom teachers, these teachers can readily view their role as one of being able to assist in changing student behavior as opposed to this being only a role assumed by special education teachers.

Parental and student involvement extend the range of collegiality in the prereferral process. The focus remains on improving student academic and social behavior. Ultimately, the major benefit of the prereferral process accrues to students because of consistency of staff expectations, delineation of student problems and interventions and the offering of more appropriate services to students because of more comprehensive information and input.

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